FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMITION

13303	393
-------	-----

Prefix

OMB Approval						
OMB Number:	3235-0076					
Expires:	May 31, 2005					
Estimated average burden						
hours per response	t					

SEC USE ONLY

DATE RECEIVED

Serial

Name of Offering (check if this is an amendment and	I name has changed, and in	ndicate change.)					
An offering Limited Partnership Interests - minimu		RECEIVED CA					
Filing Under (Check box(es) that apply): Rule 504	☐ Rule 505	□ Rule 506	□ Se	ection 4(6)	LOE		
Type of Filing: New Filing □ Amendment	=			//			
	A. BASIC IDENTIF	ICATION DATA	L	// 301	1 4 3 2007 >>		
1. Enter the information requested about the issuer				13			
Name of Issuer (check if this is an amendment	and name has changed, an	d indicate change.)		(3)			
CRO DEVELOPMENT I, L.P.					<u> 200 / (5)</u>		
Address of Executive Offices (Number and Street, City,	State, Zip Code)		Teleph	Telephone Number (Including Area Code)			
12200 Stemmons Freeway, Suite 100, Dallas, Texas 75	234	ROCESSE	Need t	his. (972) 888-8144			
Address of Principal Business Operations (Number and	Street, City, State, Zip Co	ode)	Teleph	one Number (Includ	ing Area Code)		
(if different from Executive Offices)		UN 2 2 2007					
Brief Description of Business	J	טוע צ ג צטטך					
Development, ownership and operation of restaurant	s •	FHOMS:ON	<u>`ノ</u>				
Type of Business Organization	Ċ						
☐ corporation ⊠	limited partnership, alre	any WHE! AL		other (please specify)	Limited Liability Company		
☐ business trust ☐	limited partnership, to be			_			
	<u>l</u>	<u>Month</u>	Year				
Actual or Estimated Date of Incorporation or Organizat	ion:	<u> 0 1</u>	<u> 0 5 </u>	🛛 Actual	□ Estimated		
Jurisdiction of Incorporation or Organization: (Enter tw	vo-letter U.S. Postal Service	ce abbreviation for St	tate; DE				
	CN for Canada; FN for oth	ner foreign jurisdictio	n)				

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section (6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is ceemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure To file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC ID	ENTIFICATION DA	TA								
 Each promoter of th Each beneficial own issuer; Each executive officential of the control of the co	 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers 											
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Off cer	Director	☐ General and/or Managing Partner							
Full Name (Last name first, if CRO Development GP, L.L.	<u>c.</u>											
Business or Residence Addres	•		de)									
12200 Stemmons Freeway, Su	ite 100, Dallas, To	exas 75234										
Check Box(es) that Apply:	☐ Promoter	□ Beneficial Owner	☐ Executive Off cer	Director	☐ General and/or Managing Partner							
Full Name (Last name first, if	individual)	,	-	,								
CRO Development LP, L.L.	C.											
Business or Residence Address 12200 Stemmons Freeway, Su			de)									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Off cer	Director	☐ General and/or Managing Partner							
Full Name (Last name first, if	individual)											
John D. Harkey, Jr.												
Business or Residence Addres	s (Number and St	reet, City, State, Zip Coo	de)									
12200 Stemmons Freeway, Su	iite 100, Dallas, T	exas 75234										
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner							
Full Name (Last name first, if	individual)											
Mark P. Lamm												
Business or Residence Addres	s (Number and St	reet, City, State, Zip Coo	de)	•								
12200 Stemmons Freeway, Su	iite 100, Dallas, T	exas 75234										
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner							
Full Name (Last name first, if	individual)											
Business or Residence Addres	s (Number and St	reet, City, State, Zip Coo	de)									
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner							
Full Name (Last name first, if	individual)			,								
Business or Residence Addres	s (Number and St	reet, City, State, Zip Coo	de)	,								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner							

Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	ss (Number and St	treet, City, State, Zip Coo	de)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and St	treet, City, State, Zip Coo	de)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and St	treet, City, State, Zip Coo	de)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Off cer	☐ Director	☐ General and/or Managing Partne
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and St	treet, City, State, Zip Coo	de)		
	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partn
Check Box(es) that Apply:					
Check Box(es) that Apply: Full Name (Last name first, i	f individual)				
		treet, City, State, Zip Coo			
Full Name (Last name first, i		treet, City, State, Zip Coo	de) Executive Officer	☐ Director	☐ General and/or Managing Partne
Full Name (Last name first, i	ess (Number and St			☐ Director	☐ General and/or Managing Partne

	-					B. INF	ORMAT	TION AB	OUT OF	FERING				
1.	Has	the issuer s	sold or do	es the issue						ŭ		•	Yes	No ⊠
					Answer	also in Ap	pendix, Co	olumn 2, if	filing und	er ULOE				
2.	Wha	t is the mir	nimum inv	estment th	at will be	accepted fr	om any in	dividual?					\$10,000	
3.	Does	the offeri	ng permit	joint owne	rship of a	single unit	?						Yes ⊠	No
4.	any of the of SEC listed	commission offering. If and/or wit	n or simila a person th a state o	ar remuner to be listed or states, lis	ation for so is an asso at the name	olicitation ciated pers of the bro	of purchas on or ager ker or dea	ers in cont nt of a brok der. If moi	nection wit ter or deal- re than five	lirectly or in h sales of sear registered to (5) persons on for that be	curities in with the to be	1		
Full	Nam	e (Last nar	ne first, if	individual)									
				s (Number 210, Mem			te, Zip Co	de)						
Nan	ne of	Associated	Broker of	r Dealer										
Wu	nderli	ch Securiti	es, Inc.											· ====================================
				Has Solici						••••••			Г	☐ All States
[AL	.] X []	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH]	[CA]	[CO] [LA] X [NM]	[CT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] X [MI] [OH] [WV]		[HI] [MS] X [OR] [WY]	[ID]	
Full	Nam	e (Last nar	ne first, if	individual)									
Bus	iness	or Residen	ce Addres	s (Number	and Stree	t, City, Sta	te, Zip Co	de)						
Nan	ne of a	Associated	Broker of	r Dealer										
				Has Solici		nds to Sol	icit Purcha	isers						All States
[AL [IL] [M] [RI]	ר] רן	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full	Nam	e (Last nar	ne first, if	individual)									
Bus	iness	or Residen	ce Addres	s (Number	and Stree	t, City, Sta	te, Zip Co	de)						
Nan	ne of	Associated	Broker of	r Dealer		* *								<u></u>
				Has Solici				isers						All States
[AL [IL] [MT [RI]	[]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [Ml] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the column below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ -0	\$-0-
	Equity	\$-0-	\$-0-
	☐ Common ☐ Preferred	\$-0-	\$-0-
	Convertible Securities (including warrants)	\$-0-	\$-0-
	Partnership Interests	\$4,000,000	\$1,575,000
	Other (Specify:)	\$ -0-	\$-0-
	Total	\$4,000,000	\$1,575,000
2.	Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of		
	their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	27	\$1,575,000
	Non-accredited Investors	0	0
	Total (for filing under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	N/A
	Regulation A	N/A	N/A
	Rule 504	N/A	N/A
	Total	N/A	N/A
4.a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs	\boxtimes	\$3,000
	Legal Fees	\boxtimes	\$50,000
	Accounting Fees	\boxtimes	\$2,000
	Engineering Fees		\$0
	Sales Commissions (Specify finder's fees separately)	\boxtimes	\$126,000
	Other Expenses (identify): Travel/Presentation Costs	\boxtimes	\$10,000
	Total	\boxtimes	\$191,000

C. OFFERING PRICE, NO. OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b.	Enter the difference between the aggregate offering price g and total expenses furnished in response to Part C-Question gross proceeds to the issuer."		⊠		\$1,384,000
5.	for each of the purposes shown. If the amount for any pur and check the box to the left of the estimate. The total	pose is not known, furnish an estimate of the payments listed must equal the		•	
			Payments to Officers, Directors, of Affiliates	&	Payments To Others
	Salaries and Fees		□\$0		\$0
	Purchase of real estate		□\$0		\$0
	Purchase, rental or leasing and installation of machiner	y and equipment	□\$0	\boxtimes	\$630,000
	Construction or leasing of plant buildings and facilities		□\$ 0	\boxtimes	\$ 454,000
			□ \$0		\$ 0
	Repayment of indebtedness		□ \$0		\$0
	Working Capital		□ \$0		\$0
	Other (specify)Pre-opening, including labor, marketing	and small wares	□ \$ 0		\$300,000
	Column Totals		□ \$ 0	\boxtimes	\$1,384,000
	Total Payments Listed (column totals added)		⊠	\$1,384,0	00
	D. FEDERA	L SIGNATURE	······································		
the wri	following signature constitutes an undertaking by the issues	to furnish to the U.S. Securities and I	Exchange Commission	ı, upon	
		Signature	Date		
CR	D DEVELOPMENT I, L.P.		June <u>11</u>	_, 2007	
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)			
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.b. above. Payments to Officers, Directors, & Affiliates Purchase of real estate Purchase, rental or leasing and installation of machinery and equipment. Display the purchase, rental or leasing of plant buildings and facilities. Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger Repayment of indebtedness. Working Capital. Other (specify)Pre-opening, including labor, marketing and small wares. Display the issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, Total Payments Listed (column totals added). Display the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) CRO DEVELOPMENT 1, L.P. Signature CRO DEVELOPMENT 1, L.P.					
				,	
	ATT	ENTION			
	Intentional misstatements or omissions of fact con-	stitute federal criminal violations.	(See 18 U.S.C. 1001	1.)	

•

	E. STATE SIGNATURE										
1.	Is any party described in 17 CFR 230.262 prese provisions of such rule?	• •									
See	Appendix, Column 5, for state response										
2.	The undersigned issuer hereby undertakes to fu on Form D (17 CFR 239.500) at such times as i	•	in which this notice is filed, a notice								
3.	The undersigned issuer hereby undertakes to fit the issuer to offerees.	urnish to the state administrators, upon writ	ten request, information furnished by								
4.	The undersigned issuer represents that the iss Uniform Limited Offering Exemption (ULOE) the availability of this exemption has the burde	of the state in which this notice is filed and	d understands that the issuer claiming								
	issuer has read this notification and knows the undersigned duly authorized person.	contents to be true and has duly caused thi	s notice to be signed on its behalf by								
Issu	er (Print or Type)	Signature	Date 2007								
CR	O DEVELOPMENT I, L.P.		June, 2007								
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)									

John D. Harkey, Jr., Manager of CRO Development GP, L.L.C., its General Partner

Instruction:

John D. Harkey, Jr.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

	1		2 3 4							
	non-a inve	d to sell to accredited estors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of Investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes No		(Fait G-item 1)	Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No	
AL	 	х			 -	0	\$.00	··	х	
AK	 	x				0	\$.00		x	
AZ		х				0	\$.00		x	
AR	 	х				0	\$.00		x	
CA		Х				0	\$.00		х	
СО		Х				0	\$.00		X	
СТ	ļ <u>.</u>	Х				0	\$.00		х	
DE		Х				0	\$.00		Х	
DC	 	X				0	\$.00		х	
FL		Х	LP Interests	1	\$20,000	0	\$.00		X	
GA		Х				0	\$.00		X	
HI		Х			-	0	\$.00		Х	
ID		Х				0	\$.00	,	Х	
IL		х	LP Interests	1	\$100,000	0	\$.00		X	
IN		Х				0	\$.00		X	
IA		х				0	\$.00		х	
KS	·	×				0	\$.00		X	
KY		х	LP Interests	1	\$117,500	0	\$.00		×	
LA		х	LP Interests		\$100,000	0	\$.00		х	
MA		Х				0	\$.00		х	
ME		X				0	\$.00		х	
MD	1	X			 	0	\$.00		х	
MI		х				0	\$.00		х	
MN	1	Х				0	\$.00		Х	
MS	1	X	LP Interests	3	\$100,000	0	\$.00	\	×	
мо		Х				0	\$.00		Х	
MT		Х				0	\$.00		х	
NE		X				0	\$.00		×	
NV		Х		1		0	\$.00		х	
NH		Х				0	\$.00		Х	
NJ	1	Х				0	\$.00		х	
NM		×				0	\$.00		Х	
NY		Х				0	\$.00		Х	

APPENDIX

1		2	3		4				5
	non-a inve	tend to sell to Type of security on-accredited and aggregate investors in offering price amount purchased in State State offered in state Part B-Item 1) (Part C-Item 1)						Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No
NC		X		<u> </u>		0	\$.00		Х
ND		X				0	\$.00		×
ОН		х			-	0	\$.00		X
ок		X				0	\$.00		X
OR		х			 -	0	\$.00		X
PA	-	X				0	\$.00	 	X
RI	-	X				0	\$.00		x
sc	 	Х				0	\$.00		х
SD		х				0	\$.00		Х
TN		x	LP Interests	12	\$329,000	0	\$.00		X
TX		х	LP Interests	10	\$808,500	0	\$.00		×
UT		х			· · · · · · · · · · · · · · · · · · ·	0	\$.00		Х
VT		х				0	\$.00		х
VA	1	X				0	\$.00		x
WA	<u> </u>	х				0	\$.00		×
wv	1	X				0	\$.00		X
WI		×				0	\$.00		x
WY		х				0	\$.00		х
PR		х				0	\$.00		Х
		1	!	1			!		

